Application Data Sheet

Middle Name::

Application Information	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	ACTIVE AGENT DELIVERY DEVICE
Attorney Docket Number::	RODDENBERY2
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Ed

Family Name:: RODDENBERY Name Suffix:: City of Residence:: Columbus State or Province of Residence:: Georgia Country of Residence:: USA Street of Mailing Address:: 2844 Nancy Street City of Mailing Address:: Columbus State or Province of Mailing Address:: Georgia Country of Mailing Address:: **USA** Postal or Zip Code of Mailing Address:: 31906 **Applicant Authority Type::** Inventor **Primary Citizenship Country::** USA Status:: **Full Capacity** Given Name:: Robert Middle Name:: Family Name:: STOVER Name Suffix:: City of Residence:: **Thomasville** State or Province of Residence:: Georgia Country of Residence:: USA Street of Mailing Address:: 15 Spring Bok Lane City of Mailing Address:: **Thomasville** State or Province of Mailing Address:: Georgia Country of Mailing Address:: **USA** Postal or Zip Code of Mailing Address:: 31792 **Applicant Authority Type::** Inventor Primary Citizenship Country:: **USA** Status:: **Full Capacity** Given Name:: Charles Middle Name:: D. Family Name:: **BLACK**

Name Suffix::

City of Residence::

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Jr.

Cleveland

Initial 1/29/2004

State or Province of Residence:: Georgia

Country of Residence:: USA

Street of Mailing Address:: 126 Foxwood Street

City of Mailing Address:: Cleveland

State or Province of Mailing Address:: Georgia

Country of Mailing Address:: USA

Postal or Zip Code of Mailing Address:: 30528

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Robert

Middle Name:: M.

Family Name:: FULLER

Name Suffix::

City of Residence:: Helen

State or Province of Residence:: Georgia

Country of Residence:: USA

Street of Mailing Address:: Box 908

City of Mailing Address:: Helen

State or Province of Mailing Address:: Georgia

Country of Mailing Address:: USA

Postal or Zip Code of Mailing Address:: 30545

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application:: Continuity Type:: Parent Parent Filing

Application:: Date::

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::